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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/567,941	02/10/2006	David Jay Duffield	PU030248	4571	
<sup>24498</sup> Thomson Licen	7590 09/01/200 sing LLC	9	EXAMINER		
P.O. Box 5312			ALLISON, ANDRAE S		
Two Independence Way PRINCETON, NJ 08543-5312			ART UNIT	PAPER NUMBER	
,			2624		
			MAIL DATE	DELIVERY MODE	
			09/01/2009	PAPER	

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Intonsious Cummons	10/567,941	DUFFIELD ET AL.	
Interview Summary	Examiner Art Unit		
	ANDRAE S. ALLISON	2624	
All participants (applicant, applicant's representative, PTO	personnel):		
(1) <u>ANDRAE S. ALLISON</u> .	(3)		
(2) <u>Joseph J Opalach</u> .	(4)		
Date of Interview: 21 August 2009.			
Type: a)⊠ Telephonic b)⊡ Video Conference c)⊡ Personal [copy given to: 1)⊡ applicant 2	²)∏ applicant's representative	e]	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description: <u>n/a</u> .	e)⊠ No.		
Claim(s) discussed: <u>n/a</u> .			
Identification of prior art discussed: <u>n/a</u> .			
Agreement with respect to the claims f) was reached. g	)∏ was not reached. h)⊠ N	I/A.	
Substance of Interview including description of the general reached, or any other comments: <u>The Examiner contacted case</u> . Applicant Representative informed the Examiner that	<u>Applicant Representative to ir</u>	nquire about the	
(A fuller description, if necessary, and a copy of the amend allowable, if available, must be attached. Also, where no callowable is available, a summary thereof must be attached	opy of the amendments that w		
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INT FILE A STATEMENT OF THE SUBSTANCE OF THE INTERPOLITIES ON REVERSE SIDE OF ON Attached sheet.	last Office action has already OF ONE MONTH OR THIRTY ERVIEW SUMMARY FORM,	been filed, APP DAYS FROM T WHICHEVER IS	LICANT IS THIS LATER, TO
	/Andrae S Allison/		

Application No.

Applicant(s)